Promoting Equitable Care for LGBT Patients and Families

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The HEI 2014 Core Four Leader Criteria

THE HEALTHCARE EQUALITY INDEX 2014 ASKED 41 QUESTIONS about best practices in LGBT patient-centered care. Ten of these questions constituted the Core Four Leader Criteria listed below, encompassing the policies and practices considered foundational for equitable and inclusive LGBT care. The first two of the Core Four criteria call for policies ensuring that LGBT patients and their families are welcomed and provided with care free of discrimination. The third criterion calls for a LGBT-inclusive employee non-discrimination policy. The fourth criterion calls for the staff training necessary to bring these policies to life and ensure their compliance.

HEI 2014 survey participants that met all of the Core Four criteria were awarded "Leader in LGBT Healthcare Equality" status (for a list of 2014 Equality Leaders, see page 16). To receive credit for a "yes" response to any of the Core Four questions, HEI survey participants were required to provide written documentation of their compliance, which was carefully reviewed by HRC staff. To receive credit for a "yes" response to the first three Core Four criteria, the non-respondents either had to have their policies clearly stated on their website or they had to submit their policies to us for review. For more information about the Core Four criteria: www.hrc.org/hei/the-core-four

Patient Non-Discrimination Policies

- **1a** Patient non-discrimination policy (or patients' bill of rights) is fully LGBT inclusive by including both the terms "sexual orientation" and "gender identity"
- 1b Patient non-discrimination policy is communicated to patients in at least two readily accessible ways

2

Visitation Policies

- 2a Visitation policy explicitly grants equal visitation to LGBT patients and their visitors
- 2b Equal visitation policy is communicated to patients and visitors in at least two readily accessible ways

3

Employment Non-Discrimination Policies

3a Employment non-discrimination policy (or equal employment opportunity policy) is fully LGBT inclusive by including both the terms "sexual orientation" and "gender identity"

4

Training in LGBT Patient-Centered Care

HEI-approved training in LGBT patient-centered care was provided to key staff members in 2014



Patient Non-Discrimination Policies

Percentage of facilities that have a fully inclusive LGBT Patient Non-Discrimination Policy



survey respondents



LESBIAN, GAY, BISEXUAL AND TRANSGENDER PEOPLE

continue to face discrimination in healthcare because of their sexual orientation and/or gender identity. The first of the HEI Core Four criteria calls for a patient non-discrimination policy (or patients' bill of rights) that includes both "sexual orientation" and "gender identity."

97% of HEI 2014 survey participants (494 of 507 respondents) documented that they include both "sexual orientation" and "gender identity" in their patient non-discrimination policy. This represents an increase from 87% of HEI 2013 survey participants. Notable this year is the fact that among survey participants there was no difference in the percentage of respondents that included "sexual orientation" and those that included "gender identity" in their policies, indicating that more hospitals are adopting the fully LGBT-inclusive patient non-discrimination protections required by The Joint Commission.

Unfortunately, we were unable to find the patient nondiscrimination policies for all of the non-respondent hospitals, as many facilities choose not to include their patients' bill of rights on their hospital website and they did not respond to invitations to submit their policies to us. Of the 640 non-respondent hospitals, we found or obtained the patient non-discrimination policies for 501 hospitals. For these hospitals, only 257 of the hospitals or 51% were found to have a patient non-discrimination policy that included both the terms "sexual orientation" and "gender identity."

Among the non-respondent hospitals, we continue to see the trend of "gender identity" being much less frequently protected than "sexual orientation." Among the non-respondent hospitals, 72% of the patient non-discrimination policies contained the term "sexual orientation" but only 52% contained the term "gender identity." This gap must be closed. In a comprehensive national survey of transgender Americans, 19% of respondents reported being refused care because of their transgender status, 25% reported being

harassed or disrespected in medical settings and 25% reported delaying needed care because of concern about discrimination from medical providers.*

A patient non-discrimination policy is only effective, of course, if patients and staff know about it. Therefore, the HEI requires survey participants to document not only that they have an LGBT-inclusive nondiscrimination policy but also that they make it readily accessible to patients.

To achieve full credit for this Core Four criterion, a non-discrimination policy must be explicitly LGBTinclusive and must be made available to patients in at least two of the following ways:

- Posted on facility website
- In materials given to patients at admitting/ registration
- In materials given to patients at other time(s)
- In materials available for take-away in patient waiting areas
- Posted in patient waiting area(s)

98% of these respondents documented that their non-discrimination policy was readily accessible and communicated to patients in at least two ways. The largest number (88%) made their non-discrimination policy available via their website, with most also disseminating it via materials given to patients or posted in patient waiting areas.

For more information about this Core Four criterion: hrc.org/patient-non-discrimination

Injustice at Every Turn: A Report of the National Transgender Discrimination Survey. Washington: National Center for Transgender Equality and National Gay and Lesbian Task Force, 2011.

* Grant, Jaime M., Lisa A. Mottet, Justin

Jody L. Herman

and Mara Keisling.

Tanis, Jack Harrison,

In 2011, The Joint Commission issued a standard that requires hospitals to prohibit discrimination based on sexual orientation and gender identity. Learn more at www.jointcommission.org/lgbt

Equal Visitation Policies

Percentage of facilities that have an equal visitation policy







focuses on the unique challenges faced by LGBT people in visitation. Across the U.S., same-sex couples, same-sex parents and other LGBT people fear that they could be prevented from visiting their loved ones in healthcare settings because their state does not legally recognize same-sex relationships and/or because of bias or discomfort on the part of employees.

THE SECOND OF THE HEI CORE FOUR CRITERIA

In 2010, after learning of a tragic incident in which a lesbian was denied visitation to her dying partner, President Barack Obama directed the U.S. Secretary of Health and Human Services to develop regulations protecting the visitation rights of all patients. These regulations are now in effect at all hospitals that accept Medicare or Medicaid payments, which is the vast majority of facilities.

98% of the HEI 2014 survey respondents for which this question was applicable (450 of 458 respondents, since some respondents are outpatient facilities only) documented that they have explicitly LGBT-inclusive visitation policies. This total represents a continued and welcome increase over past years: only 53% of respondents offered equal visitation in 2011, 75% offered it in 2012 and 90% offered it in 2013.

Unfortunately, we were unable to find equal visitation policies for all of the non-respondent hospitals, as many facilities choose not to include any information about who can visit patients on their hospital website and they did not respond to invitations to submit their policies to us. Of the 640 non-respondent hospitals, we found or obtained the visitation policies for 494 hospitals. For these hospitals, 414 of the hospitals or **84%** were found to have an equal visitation policy. For the purposes of our research we were very liberal in what we counted as an equal visitation policy. We did not

require that a hospital post on its website that a patient has the right to designate the visitors of their choice or that visitation would not be limited based on sexual orientation or gender identity. Instead we looked for language that was welcoming to all friends and family and that did not conflict with a patient's right to choose visitors. If we had required hospitals to explicitly state that patients had a right to the visitors of their choice, the percentage of hospitals in compliance would be significantly lower.

To achieve full credit for this Core Four criterion, HEI participants must document not only that their visitation policy explicitly provides equal visitation to LGBT patients and their visitors but also that it is readily accessible to them in at least two of the following ways:

- Posted on facility website
- In materials given to patients at admitting/ registration
- In materials given to patients at other time(s)
- In materials available for take-away in patient waiting areas
- Posted in patient waiting area(s)

89% of respondents documented that their visitation policy was readily accessible to patients and visitors and communicated to patients in at least two ways. The largest number (83%) made their visitation policy available via their website, with most also disseminating it via materials given to entering patients or posted in patient waiting areas.

For more information about this Core Four criterion: <u>hrc.org/visitation</u>

Since 2011, the Conditions of Participation of the federal Centers for Medicare and Medicaid Services (CMS) have required hospitals to permit patients to designate visitors of their choosing and to prohibit discrimination in visitation based on sexual orientation and gender identity. As an organization with CMS-deeming authority, The Joint Commission aligned its hospital standards with the CMS requirements.

A joint HRC/America Health Lawyers Association publication provides more information: hrc.org/revisiting-visitation







of 2O14 HEI non-respondents

The 24-point

gap between

THE THIRD OF THE HEI CORE FOUR CRITERIA calls for an employment non-discrimination policy (or an equal employment opportunity policy) that includes both "sexual orientation" and "gender identity." Such a policy typically covers all conditions of employment, including hiring, promotion, termination and compensation.

Federal law does not yet protect employees from discrimination based on actual or perceived sexual orientation or gender identity. Furthermore, only a minority of states have passed laws prohibiting discrimination on the basis of sexual orientation (22 states and the District of Columbia) or gender identity (19 states and the District of Columbia). This Core Four criterion calls on healthcare facilities to protect their LGBT employees from discrimination regardless of state non-discrimination laws. LGBT staff members not only deserve a discrimination-free workplace but they also informally educate co-workers, provide valuable guidance to facility leadership and serve as ambassadors to LGBT communities.

96% of HEI 2014 survey participants (487 of 507 respondents) documented that they include both "sexual orientation" and "gender identity" in their employment non-discrimination policy. This represents an increase from 85% of HEI 2013 survey participants. Notable this year is the fact that among survey participants the difference between those that provided protections for "sexual orientation" and "gender identity," narrowed significantly. This year, 99% of HEI survey participants had policies that included "sexual orientation" and 96% had policies that also included "gender identity."

Unfortunately, we were unable to find employment non-discrimination policies for all of the non-respondent hospitals, as many facilities choose not to include an employment non-discrimination statement on their hospital website and they did not respond to invitations to submit their policies to us. Of the 640 non-respondent hospitals, we found or obtained the employment non-discrimination policies for 421 hospitals. For these hospitals, only 209 of the hospitals or **50%** were found to have an employment non-discrimination policy that included both the terms "sexual orientation" and "gender identity."

Among the non-respondent hospitals, we continue to see the trend of "gender identity" being much less frequently protected than "sexual orientation." Among these hospitals, 74% of the employment non-discrimination policies contained the term "sexual orientation" but only 50% contained the term "gender identity."

Among the non-respondent hospitals, there is a significant 25-point gap between those that included protection for "sexual orientation" and those who also included "gender identity" in their policies. This gap is unacceptable and must be closed. In the national survey of transgender Americans cited earlier, 26% reported that they had lost a job due to being transgender or gender-non-conforming and 50% had been harassed on the job.*

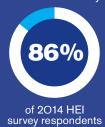
workplace protection for "sexual orientation" and for "gender identity" found among nonrespondent hospitals must be closed, 26% of transgender **Americans** report that they have lost a job due to being transgender or gender-nonconforming and 50% report being harassed on the job.

* Grant, Jaime M., Lisa A. Mottet, Justin Tanis, Jack Harrison, Jody L. Herman and Mara Keisling. Injustice at Every Turn: A Report of the National Transgender Discrimination Survey. Washington: National Center for Transgender Equality and National Gay and Lesbian Task Force, 2011.

HRC's Corporate Equality Index (CEI) evaluates LGBT inclusion at the nation's largest employers. For more information about this unique and comprehensive resource for LGBT workplace equity, visit hrc.org/cei



Training in LGBT Patient-Centered Care



Over 10,000 hospital and clinic staff trained through free HEI webinars **THE FOURTH OF THE HEI CORE FOUR CRITERIA** calls for key facility employees to receive expert training in LGBT patient-centered care. This criterion recognizes the fact that training is critical for policies to be successful and for truly LGBT-welcoming care to occur.

To meet this criterion, facilities participating in the HEI for the first time in 2014 were required to document that they had registered at least one executive level staff member in each of five designated work areas for at least 90 minutes of training from a proven expert in LGBT health. The five work areas were: facility leadership, nursing management, patient relations/services management, admitting/registration management and human resources management. Returning HEI participants were required to document that they had registered at least ten additional employees for training in LGBT-centered care; most of them registered many more staff than required.

To assist facilities in meeting this HEI criterion and to ensure high-quality training, the HEI offered three free webinars in LGBT patient-centered care to all HEI participants, free of charge: a 90-minute "Executive Briefing," a 60-minute "Introduction to LGBT Patients," and a 60-minute presentation on "Best Organizational Practices for Transgender Patients." These acclaimed webinars enabled the HEI to train over 10,000 hospital and clinic staff nationwide in 2014.

86% of HEI 2014 respondents documented that they had provided employee training in LGBT patient-centered care. This represents an increase over the HEI 2013, when 80% of facilities trained their staff to meet this criterion.

"I wanted to let you know that this was probably the most informative and interesting Webinar that I have ever attended. I was so intent on the subject matter that I failed to realize there were tornado warnings and a 'code gray' on my hospital unit! Thank you so much for presenting this important topic! I would recommend this webinar to all healthcare providers."

Jeanne Kaletta, RN, BSN Manager, 8 West ICU Step-down University Hospitals Parma Medical Center



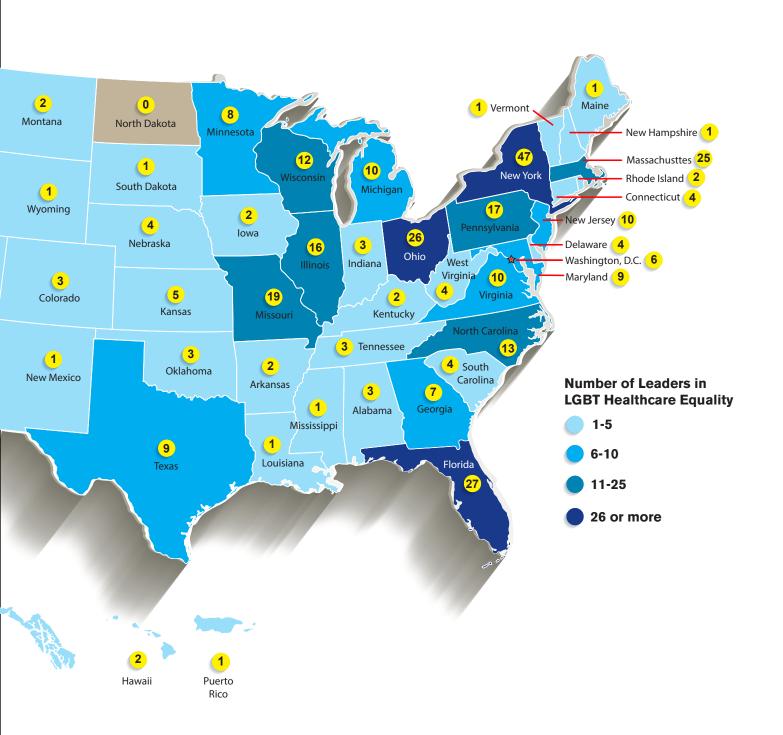
HEI 2014 Leaders in LGBT Healthcare Equality

This year, 427 of the 507 HEI 2014 survey respondents (84%) met all of the Core Four criteria for LGBT patient-centered care, earning the coveted status of "2014 Leader in LGBT Healthcare Equality." This represents a 101% increase in the number of leaders (212 respondents were leaders in 2013).

Featured in this list are the 427 HEI 2014 Equality Leaders. In addition to being celebrated in the HEI report, Equality Leaders receive a special logo and a toolkit of resources for outreach to LGBT residents in their service area.

Every state except Idaho and North Dakota has at least one Equality Leader.







Facility Name	City
ALABAMA	
VA Birmingham Medical Center	Birmingham
VA Central Alabama Veterans Health Care System	Montgomery
VA Tuscaloosa Medical Center	Tuscaloosa
ALASKA	
VA Alaska Healthcare System	Anchorage
ARIZONA	
VA Northern Arizona Health Care System	Prescott
VA Southern Arizona Health Care System	Tucson
ARKANSAS	
VA Health Care System of the Ozarks	Fayetteville
VA Central Arkansas Veterans Healthcare System	Little Rock
CALIFORNIA	
Kaiser Permanente, Anaheim Medical Center	Anaheim
Kaiser Permanente, Antioch Medical Center	Antioch
Kaiser Permanente, Baldwin Park Medical Center	Baldwin Park
University Health Services (Tang Center)	Berkeley
Scripps Mercy Hospital (Chula Vista campus)	Chula Vista
John Muir Medical Center, Concord	Concord
Kaiser Permanente, Downey Medical Center	Downey
Rancho Los Amigos National Rehabilitation Center	Downey
Scripps Memorial Hospital Encinitas	Encinitas
Kaiser Permanente, Fontana Medical Center	Fontana
Kaiser Permanente, Fremont Medical Center	Fremont
Kaiser Permanente, Fresno Medical Center	Fresno
Kaiser Permanente, South Bay Medical Center	Harbor City
Kaiser Permanente, Irvine Medical Center	Irvine
Scripps Green Hospital	La Jolla
Scripps Memorial Hospital La Jolla	La Jolla
VA Loma Linda Healthcare System	Loma Linda
VA Long Beach Healthcare System	Long Beach
Cedars-Sinai Medical Center	Los Angeles
Children's Hospital Los Angeles	Los Angeles
Kaiser Permanente, Los Angeles Medical Center	Los Angeles
Kaiser Permanente, West Los Angeles Medical Center	Los Angeles
Los Angeles LGBT Center	Los Angeles
Mattel Children's Hospital UCLA	Los Angeles
Resnick Neuropsychiatric Hospital at UCLA	Los Angeles
Ronald Reagan UCLA Medical Center	Los Angeles
Kaiser Permanente, Manteca Medical Center	Manteca

Facility Name	City
Contra Costa Regional Medical Center	Martinez
Kaiser Permanente, Modesto Medical Center	Modesto
Kaiser Permanente, Moreno Valley Community Hospital	Moreno Valley
Kaiser Permanente, Oakland Medical Center	Oakland
Kaiser Permanente, Ontario Medical Center	Ontario
Desert Regional Medical Center	Palm Springs
Palo Alto Medical Foundation	Palo Alto
VA Palo Alto Health Care System	Palo Alto
Kaiser Permanente, Panorama City Medical Center	Panorama City
Eisenhower Medical Center	Rancho Mirage
Kaiser Permanente, Redwood City Medical Center	Redwood City
Kaiser Permanente, Richmond Medical Center	Richmond
Kaiser Permanente, Riverside Medical Center	Riverside
Kaiser Permanente, Roseville Medical Center	Roseville
Kaiser Permanente, Sacramento Medical Center	Sacramento
Kaiser Permanente, South Sacramento Medical Center	Sacramento
UC Davis Medical Center	Sacramento
Kaiser Permanente, San Diego Medical Center	San Diego
Scripps Mercy Hospital (San Diego campus)	San Diego
UC San Diego Health System	San Diego
VA San Diego Healthcare System	San Diego
California Pacific Medical Center	San Francisco
Kaiser Permanente, San Francisco Medical Center	San Francisco
UCSF Medical Center	San Francisco
Kaiser Permanente, San Jose Medical Center	San Jose
Santa Clara Valley Medical Center	San Jose
Kaiser Permanente, San Leandro Medical Center	San Leandro
Kaiser Permanente, San Rafael Medical Center	San Rafael
Kaiser Permanente, Santa Clara Medical Center	Santa Clara
Sutter Maternity & Surgery Center	Santa Cruz
UCLA Medical Center, Santa Monica	Santa Monica
Kaiser Permanente, Santa Rosa Medical Center	Santa Rosa
Kaiser Permanente, South San Francisco Medical Center	South San Francisco
Kaiser Permanente, Vacaville Medical Center	Vacaville
Kaiser Permanente, Vallejo Medical Center	Vallejo
John Muir Medical Center, Walnut Creek	Walnut Creek
Kaiser Permanente, Walnut Creek Medical Center	Walnut Creek
Kaiser Permanente, Woodland Hills Medical Center	Woodland Hills
COLORADO	
Denver Health Medical Center	Denver



Facility Name	City
VA Eastern Colorado Health Care System	Denver
VA Grand Junction Medical Center	Grand Junction
CONNECTICUT	
Bridgeport Hospital	Bridgeport
Greenwich Hospital	Greenwich
Yale-New Haven Hospital	New Haven
VA Connecticut Health Care System	West Haven
DELAWARE	
Beebe Medical Center	Lewes
Christiana Hospital	Newark
Nemours/Alfred I. duPont Hospital for Children	Wilmington
Wilmington Hospital	Wilmington
DISTRICT OF COLUMBIA	
MedStar Georgetown Medical Center	Washington
MedStar National Rehabilitation Network	Washington
MedStar Washington Hospital Center	Washington
Sibley Memorial Hospital	Washington
VA Washington DC Medical Center	Washington
Whitman-Walker Health	Washington
FLORIDA	
FLORIDA	
VA Bay Pines Healthcare System	Bay Pines
VA Bay Pines Healthcare System VA North Florida/South Georgia Veterans Healthcare System	Gainesville
VA Bay Pines Healthcare System VA North Florida/South Georgia Veterans Healthcare System Specialty Hospital Jacksonville	Gainesville Jacksonville
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Facility Name	City
Edward White Hospital	St. Petersburg
Palms of Pasadena Hospital	St. Petersburg
St. Petersburg General Hospital	St. Petersburg
Tallahassee Memorial HealthCare Inc.	Tallahassee
H. Lee Moffitt Cancer Center & Research Institute	Tampa
VA James A. Haley Veterans Hospital	Tampa
VA West Palm Beach Medical Center	West Palm Beach
GEORGIA	
Emory University Hospital	Atlanta
Emory University Hospital Midtown	Atlanta
Feminist Women's Health Center	Atlanta
Grady Memorial Hospital	Atlanta
Piedmont Atlanta Hospital	Atlanta
Emory Johns Creek Hospital	Johns Creek
Emory University Orthopaedics and Spine Hospital	Tucker
HAWAII	
Kaiser Permanente, Moanalua Medical Center	Honolulu
VA Pacific Islands Health Care System	Honolulu
ILLINOIS	
St. Mary's Hospital	Centralia
Advocate Illinois Masonic Medical Center	Chicago
Ann & Robert H. Lurie Children's Hospital of Chicago	Chicago
The Howard Brown Health Center	Chicago
Methodist Hospital of Chicago	Chicago
Northwestern Memorial Hospital	Chicago
Rush University Medical Center	Chicago
University of Illinois Hospital	Chicago
VA Jesse Brown Medical Center	Chicago
VA Illiana Health Care System	Danville
VA Edward Hines Jr. Hospital	Hines
Northwestern Lake Forest Hospital	Lake Forest
VA Marion Medical Center	Marion
Good Samaritan Regional Health Center	Mount Vernon
VA Captain James A. Lovell Federal Health Care Center	North Chicago
Rush Oak Park Hospital	Oak Park
INDIANA	
Eskenazi Hospital	Indianapolis
VA Richard L. Roudebush Medical Center	Indianapolis
Indiana University Health Ball Memorial Hospital	Muncie



Facility Name	City
AWOI	
VA Central Iowa Health Care System	Des Moines
University of Iowa Hospitals and Clinics	Iowa City
KANSAS	
Saint Luke's Cushing Hospital	Leavenworth
Children's Mercy South	Overland Park
Saint Luke's South Hospital	Overland Park
VA Eastern Kansas Health Care System	Topeka
VA Robert J. Dole Medical Center	Wichita
KENTUCKY	
Our Lady of Bellefonte Hospital	Ashland
Eastern State Hospital	Lexington
LOUISIANA	
Tulane University Hospital & Clinic	New Orleans
MAINE	
Penobscot Community Health Care	Bangor
MARYLAND	
Bon Secours Hospital	Baltimore
Chase Brexton Health Services	Baltimore
Greater Baltimore Medical Center	Baltimore
Johns Hopkins Hospital	Baltimore
MedStar Franklin Square Medical Center	Baltimore
Sinai Hospital of Baltimore	Baltimore
University of Maryland Medical Center	Baltimore
VA Baltimore Medical Center - Maryland Health Care System	Baltimore
Northwest Hospital Center	Randallstown
MASSACHUSETTS	
VA Edith Nourse Rogers Memorial Veterans Hospital	Bedford
Beth Israel Deaconess Medical Center	Boston
Boston Medical Center	Boston
Brigham and Women's Faulkner Hospital	Boston
Brigham and Women's Hospital	Boston
Dana-Farber Cancer Institute	Boston
Fenway Health	Boston
Massachusetts General Hospital	Boston
South End Community Health Center	Boston
VA Boston Healthcare System	Boston
Mount Auburn Hospital	Cambridge
Baystate Franklin Medical Center	Greenfield
VA Central Western Massachusetts Healthcare System	Leeds

Facility Name	City
Harvard Vanguard Medical Associates	Newton
Newton-Wellesley Hospital	Newton Lower Falls
Berkshire Medical Center	Pittsfield
Baystate Brightwood Health Center	Springfield
Baystate High Street Health Center - Adult Medicine	Springfield
Baystate High Street Health Center - Pediatric Medicine	Springfield
Baystate Mason Square Neighborhood Health Center	Springfield
Baystate Medical Center	Springfield
Baystate Regional Cancer Program	Springfield
Baystate Visiting Nurse Association & Hospice	Springfield
Baystate Mary Lane Hospital	Ware
Edward M. Kennedy Community Health Center	Worcester
MICHIGAN	
University of Michigan Health System	Ann Arbor
VA Ann Arbor Healthcare System	Ann Arbor
VA Battle Creek Medical Center	Battle Creek
Henry Ford Macomb Hospital	Clinton Township
Henry Ford Hospital	Detroit
VA John D. Dingell Medical Center	Detroit
VA Oscar G. Johnson Medical Center	Iron Mountain
VA Aleda E. Lutz Medical Center	Saginaw
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Facility Name	City
Research Medical Center	Kansas City
Saint Luke's Hospital of Kansas City	Kansas City
Saint Luke's North Hospital	Kansas City
SSM St. Joseph Hospital West	Lake St. Louis
Saint Luke's East Hospital	Lee's Summit
St. Francis Hospital & Health Services	Maryville
Audrain Medical Center	Mexico
VA John J. Pershing Medical Center	Poplar Bluff
SSM St. Joseph Health Center	St. Charles
Barnes-Jewish Hospital	St. Louis
SSM Cardinal Glennon Children's Medical Center	St. Louis
St. Louis Children's Hospital	St. Louis
SSM St. Mary's Health Center	St. Louis
VA St. Louis Health Care System	St. Louis
MONTANA	
Billings Clinic	Billings
VA Montana Health Care System	Fort Harrison
NEBRASKA	
The Nebraska Medical Center	Omaha
OneWorld Community Health Center	Omaha
OneWorld Community Health Center UNMC Physicians	Omaha Omaha
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UNMC Physicians VA Omaha-Nebraska-Western Iowa Health Care System NEVADA	Omaha Omaha
UNMC Physicians VA Omaha-Nebraska-Western Iowa Health Care System NEVADA Centennial Hills Hospital Medical Center	Omaha Omaha Las Vegas
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Facility Name	City
Morristown Medical Center	Morristown
Newton Memorial Hospital	Newton
Shore Medical Center	Somers Point
Overlook Medical Center	Summit
NEW MEXICO	
University of New Mexico Hospitals	Albuquerque
NEW YORK	
Albany Medical Center	Albany
VA Albany Medical Center: Samuel S. Stratton	Albany
VA Bath Medical Center	Bath
Southside Hospital	Bay Shore
Jacobi Medical Center	Bronx
Lincoln Medical Center	Bronx
North Central Bronx Hospital	Bronx
VA James J. Peters Medical Center	Bronx
Coney Island Hospital	Brooklyn
Cumberland Diagnostic & Treatment Center	Brooklyn
Lutheran Medical Center	Brooklyn
Woodhull Medical and Mental Health Center	Brooklyn
Evergreen Health Services	Buffalo
VA Western New York Healthcare System	Buffalo
F.F. Thompson Hospital	Canandaigua
VA Canandaigua Medical Center	Canandaigua
Elmhurst Hospital Center	Flushing
Forest Hills Hospital	Forest Hills
Catskill Regional Medical Center	Harris
The Feinstein Institute for Medical Research	Manhasset
North Shore University Hospital	Manhasset
Mountainside Residential Care Center	Margaretville
VA Hudson Valley Health Care System	Montrose
Long Island Jewish Medical Center	New Hyde Park
Bellevue Hospital Center	New York
Callen-Lorde Community Health Center	New York
Harlem Hospital Center	New York
Hospital for Special Surgery	New York
Lenox Hill Hospital	New York
Memorial Sloan Kettering Cancer Center	New York
Metropolitan Hospital Center	New York
Mount Sinai Beth Israel	New York
Mount Sinai Medical Center	New York



Facility Name	City
Mount Sinai Roosevelt	New York
Mount Sinai St. Luke's	New York
NYU Langone Medical Center	New York
Reproductive Medicine Associates of New York	New York
Plainview Hospital	Plainview
Bon Secours Community Hospital	Port Jervis
HCR Home Care	Rochester
Trillium Health	Rochester
University of Rochester's Strong Memorial Hospital	Rochester
Saratoga Hospital	Saratoga Springs
Staten Island University Hospital	Staten Island
Good Samaritan Hospital	Suffern
VA Syracuse Medical Center	Syracuse
St. Anthony Community Hospital	Warwick
NORTH CAROLINA	
Mission Hospital	Asheville
VA Asheville Medical Center	Asheville
Alamance Regional Medical Center	Burlington
UNC Hospitals	Chapel Hill
Duke Regional Hospital	Durham
Duke University Hospital	Durham
VA Durham Medical Center	Durham
Behavioral Health Hospital	Greensboro
Moses H. Cone Memorial Hospital	Greensboro
Wesley Long Hospital	Greensboro
Women's Hospital of Greensboro	Greensboro
Duke Raleigh Hospital	Raleigh
Annie Penn Hospital	Reidsville
ОНЮ	
Summa Health System	Akron
UH Ahuja Medical Center	Beachwood
UH Bedford Medical Center	Bedford
UH Geauga Medical Center	Chardon
VA Chillicothe Medical Center	Chillicothe
Bethesda North Hospital	Cincinnati
Cincinnati Children's Hospital Medical Center	Cincinnati
Good Samaritan Hospital	Cincinnati
Cleveland Clinic (Main Campus)	Cleveland
MetroHealth Medical Center	Cleveland
UH Case Medical Center	Cleveland

Facility Name	City
UH MacDonald Women's Hospital	Cleveland
UH Rainbow Babies and Children's Hospital	Cleveland
UH Seidman Cancer Center	Cleveland
VA Louis Stokes Cleveland Medical Center	Cleveland
Columbus Public Health Department	Columbus
James Cancer Hospital and Solove Research Institute	Columbus
The Ohio State University Wexner Medical Center	Columbus
VA Chalmers P. Wylie Ambulatory Care Center	Columbus
UH Conneaut Medical Center	Conneaut
VA Dayton Medical Center	Dayton
UH Elyria Medical Center	Elyria
UH Geneva Medical Center	Geneva
UH Parma Medical Center	Parma
UH Richmond Medical Center	Richmond Heights
University of Toledo Medical Center	Toledo
OKLAHOMA	
OU Medical Center	Oklahoma City
St. Anthony Hospital	Oklahoma City
St. Anthony Shawnee Hospital	Shawnee
OREGON	
OREGON	
Kaiser Permanente, Sunnyside Medical Center	Clackamas
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Facility Name	City
Chester County Hospital	West Chester
VA Wilkes-Barre Medical Center	Wilkes-Barre
PUERTO RICO	
VA Caribbean Healthcare System	San Juan
RHODE ISLAND	
Rhode Island Hospital	Providence
VA Providence Medical Center	Providence
SOUTH CAROLINA	
VA Ralph H. Johnson Medical Center	Charleston
Bon Secours St. Francis Downtown	Greenville
Bon Secours St. Francis Eastside	Greenville
Greenville Memorial Hospital	Greenville
SOUTH DAKOTA	
VA Sioux Falls Health Care System	Sioux Falls
TENNESSEE	
CHOICES	Memphis
VA Mountain Home Medical Center/Johnson City	Mountain Home
Vanderbilt University Medical Center	Nashville
TEXAS	
Parkland Memorial Hospital	Dallas
VA North Texas Health Care System	Dallas
VA El Paso Health Care System	El Paso
Greenhouse	Grand Prairie
VA Texas Valley Coastal Bend Health Care System	Harlingen
Legacy Community Health Services - Montrose Campus	Houston
The University of Texas MD Anderson Cancer Center	Houston
Reproductive Medicine Associates of Texas	San Antonio
VA Central Texas Veterans Health Care System	Temple
UTAH	
VA Salt Lake City Health Care System	Salt Lake City
VERMONT	
Fletcher Allen Health Care	Burlington
VIRGINIA	
Dominion Hospital	Falls Church
Memorial Regional Medical Center	Mechanicsville
St. Francis Medical Center	Midlothian
Bon Secours Mary Immaculate Hospital	Newport News
DePaul Medical Center	Norfolk
DePaul Medical Center Maryview Medical Center	Norfolk Portsmouth

Facility Name	City
VA Hunter Holmes McGuire Medical Center	Richmond
VA Salem Medical Center	Salem
WASHINGTON	
Group Health Olympia Medical Center	Olympia
Jefferson Healthcare	Port Townsend
Cedar River Clinics	Renton
Valley Medical Center	Renton
Group Health Capitol Hill Medical Center	Seattle
Group Health Central Hospital	Seattle
Group Health Northgate Medical Center	Seattle
Harborview Medical Center	Seattle
Northwest Hospital & Medical Center	Seattle
Seattle Cancer Care Alliance	Seattle
Seattle Children's Hospital	Seattle
UW Medical Center	Seattle
VA Puget Sound Health Care System	Seattle
Group Health Riverfront Medical Center	Spokane
WEST VIRGINIA	
VA Beckley Medical Center	Beckley
VA Clarksburg - Louis A. Johnson Medical Center	Clarksburg
VA Huntington Medical Center	Huntington
VA Martinsburg Medical Center	Martinsburg
WISCONSIN	
St. Clare Hospital	Baraboo
Hudson Hospital & Clinic	Hudson
St. Mary's Janesville Hospital	Janesville
American Family Children's Hospital	Madison
St. Mary's Hospital	Madison
University of Wisconsin Hospital & Clinics	Madison
VA William S. Middleton Memorial Veterans Hospital	Madison
Community Memorial Hospital	Menomonee Falls
AIDS Resource Center of Wisconsin	Milwaukee
Froedtert Memorial Lutheran Hospital	Milwaukee
VA Clement J. Zablocki Medical Center	Milwaukee
VA Tomah Medical Center	Tomah
WYOMING	
VA Sheridan Medical Center	Sheridan

Additional Best Practices Checklist

IN ADDITION TO THE 10 QUESTIONS CONSTITUTING THE CORE

Four Leader Criteria, the Healthcare Equality Index 2014 asked participants 31 other questions about best practices in LGBT patient-centered care. These questions constituted the Additional Best Practices Checklist, a unique and comprehensive tool for respondents to use in needs assessment and strategic planning.

Responses to the Checklist questions do not determine Leader status and are not reported by name. But documentation is requested for all "yes" responses and they are reported in aggregate, to facilitate benchmarking and indicate national trends and interests. In addition, all HEI 2014 respondents receive a customized document showing their current and aspirational practices, as indicated in the Checklist, and are provided resources to help them implement these best practices.

The Checklist asked HEI participants about their current and planned non-clinical practices in these areas:

- ✓ LGBT Patient Services & Support
- ✓ Transgender Patient Services & Support
- ✓ Patient Self-Identification
- Medical Decision-Making
- Employment Benefits & Policies
- ✓ Community Engagement

We were extremely pleased this year to see substantial increases in the number of facilities adopting and implementing many of these best practices. In the area of LGBT Patient Services and Support we saw double digit increases in the percentage of hospitals that provide LGBT specific information on their website or in brochures and LGBT related training in addition to the training provided by the HEI. We also found that 58% of hospitals provided transgender-focused training to employees this year, up from 42% last year. In the area of Patient Self-Identification, there were double digit increases in hospitals that record state registered domestic partnerships and diverse sets of parents, and more hospitals are providing employees with training explicitly reminding them that LGBT status is confidential patient information.

In the Employment Benefits and Policies section we saw some significant and very encouraging increases as well. The percentage of hospitals that provide healthcare benefits to same sex partners increased from 55% last year to 82% of this year's participants. Up from 6% last year, 20% of this year's participants have at least one health insurance plan that explicitly covers medically necessary healthcare services for transgender people, including gender transition related treatment.

We heartily applaud the facilities that have taken these critical first steps, and we encourage them to deepen their commitment to LGBT patient-centered care by continuing to adopt the best practices described in the HEI 2014 Checklist.

LGBT Patient Services and Support

THE HEI 2014 ADDITIONAL BEST PRACTICES CHECKLIST asked first about key best practices in support of LGBT patients as a group. HEI participants' responses are reported in aggregate below.

✓ Does your organization provide information about LGBT services and/or health concerns on its public website?

34% Yes

51% No, but we are interested in this

15% No

✓ Does your organization publish a brochure or other print material designed to educate or support LGBT patients?

30% Yes

56% No, but we are interested in this

14% No

✓ Does your organization regularly make LGBT-health related material published by other organizations available to patients?

34% Yes

48% No, but we are interested in this

18% No

✓ Does your organization have an LGBTfocused office, point-person, advisory group or equivalent?

59% Yes

26% No, but we are interested in this

15% No

✓ If your organization regularly surveys patients about the care they have received (e.g., via a patient satisfaction survey), does the survey explicitly allow patients to identify as LGBT, if they wish?

11% Yes

54% No, but we are interested in this

35% No.

✓ If your organization regularly surveys patients about the care they have received (e.g., via a patient satisfaction survey), does the survey explicitly collect LGBTrelated information (e.g., whether needs were met related to LGBT status)?

6% Yes

55% No, but we are interested in this

36% No

3% No data available

Since July 1, 2013, has your organization offered staff LGBT-related training in addition to training required by the HEI?

61% Yes

23% No, but we are interested in this

16% No

✓ Does your organization help make LGBT-knowledgeable and -friendly providers known as such to interested patients?

39% Yes

43% No, but we are interested in this

18% No

49% of respondents who make providers known indicated that they do so via a list for internal use, **36%** list these providers in the GLMA Provider Directory (at *www.glma.org*). **34%** do so via "tags" in an online "find a provider" system.

Has your organization reviewed any of its clinical services to identify possible LGBT-related gaps?

30% Yes

53% No, but we are interested in this

Beth Israel Medical Center



LGBT HEALTH SERVICES

A PROGRAM OF
BETH ISRAEL MEDICAL CENTER

Addressing the Special Needs of the Lesbian, Gay, Bisexual and Transgender (LGBT) Community



"At Mount Sinai we are working to ensure LGBT culturally and clinically competent healthcare throughout our system, which we hope will serve as a model for other mainstream healthcare systems, so that whenever and wherever an LGBT patient seeks healthcare to meet their needs, they will be able to find it."

Barbara E. Warren, Psy.D.

Director, LGBT Programs and Policies Office of Diversity and Inclusion Mount Sinai Health System

Mount Sinai Beth Israel's LGBT Health Services program is committed to meeting the special healthcare needs of the LGBT community with respect and compassion. The program implements a number of best practices in LGBT patient services and support. One best practice is the provision of information, referral and patient navigation for LGBT patients and consumers. They also provide professional education and training for providers in LGBT healthcare topics and trained over 1,000 employees, residents and fellows in the past year in LGBT specific cultural and clinical competency.

Transgender Patient Services and Support

TRANSGENDER PATIENTS ARE PARTICULARLY VULNERABLE IN HEALTHCARE. They can face long waits for care, pointing and laughter, negative comments, violations of confidentiality, inappropriate questions and examinations, denial of (or challenges to) bathroom use and room assignments that reflect the sex assigned to them at birth rather than their actual gender identity. Given these and many other challenges, the HEI 2014 offered participants a dedicated hour-long webinar on transgender patients' needs, highlighted these needs in the two other HEI training webinars and asked specifically about practices in support of transgender patients in the Additional Best Practices Checklist.

HEI 2014 participants' responses to the Checklist questions are reported in aggregate below.

✓ Since July 1, 2013, has your organization provided transgender-focused training to employees?

58% Yes

29% No, but we are interested in this

13% No

Has your organization trained and clearly designated at least one employee at an appropriate level of skill, knowledge and influence to serve as an adviser/navigator for transgender patients and/or to coordinate a peer accompaniment program for transgender patients?

36% Yes

46% No, but we are interested in this

18% No

Has your organization re-signed one or more single-stall bathrooms previously signed as only for men or only for women as unisex bathrooms, to assist transgender patients, patients accompanied by a different-sex child or attendant and others?

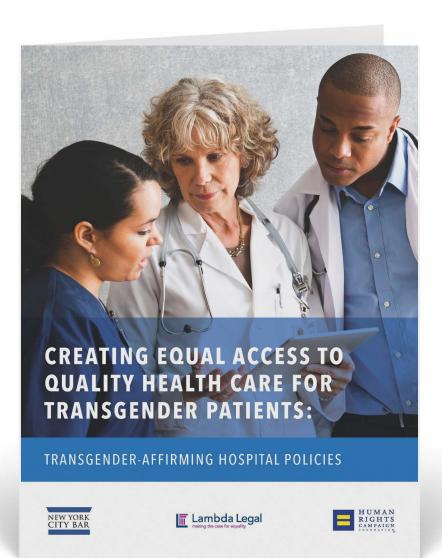
65% Yes

21% No, but we are interested in this

For more information about best practices for care of transgender patients see the publication, Creating Equal Access to Quality Health Care for Transgender Patients: Transgender-Affirming Hospital Policies, from HRC Foundation, Lambda Legal and the LGBT Rights Committee of the New York City Bar Association

This publication is available for download at:

hrc.org/transgender-affirming-hospital-policies



"Helping a transgender
Veteran transition
comes with tremendous
professional satisfaction.
These soldiers live
and serve our country
misaligned with who they
are and it is wonderful to
witness the correction. To
assist them on this journey
is the epitome of the patient
provider relationship."

Sonia Perez-Padilla, MD

Lead, Tucson Regional Transgender Team Southern Arizona Veterans Affairs Health Care System

Southern Arizona Veterans Affairs
Health Care System (SAVAHCS) has
an exceptionally strong interdisciplinary
regional transgender team to support
transgender veterans in all aspects of
care. The team helps to raise cultural
awareness and diversity perspectives of
all VA staff and fellow Veterans through
a variety of training efforts and recently
expanded their services through an
E-consult program that assists other
VA healthcare providers with their
transgender patients. In addition,
SAVAHCS has a very popular weekly
Transgender Support Group.

Patient Self-Identification

IT IS CRITICAL FOR PATIENTS TO HAVE THE

opportunity to identify themselves as lesbian, gay, bisexual and/or transgender in their health records, if they wish. The Additional Best Practices Checklist asked about four types of options for LGBT patients to self-identify as such in their health records.

First, healthcare organizations that ask patients their marital or relationship status should offer explicit options for them to indicate that they are in a same-sex partnership, particularly if they are in a state where same-sex couples may register with the state and receive healthcare-related rights. Second, transgender patients should be provided explicit options to indicate if their gender identity differs from the sex on their birth certificate, health insurance record and/ or identification documents. Third, if patients volunteer their sexual orientation for inclusion in their health records, explicit options should be provided to facilitate this. Fourth, explicit options for recording patients' parents should go beyond "mother" and "father," to be inclusive of same-sex parents and other diverse families.

In all four cases, it should be possible for LGBT status to be recorded readily, via explicit options, rather than only in free-form notes. In addition, employees should be trained to treat LGBT status as confidential, like any other patient health information.

HEI participants' responses to the Checklist questions about LGBT patient self-identification are reported in aggregate below.

✓ If your organization records patients' marital or relationship status and your organization provides care in a state where unmarried same-sex partners may register their partnership with the state, do your organization's health records offer an explicit option for patients to indicate that they are in a state-registered partnership?

45% Yes

42% No, but we are interested in this

13% No

If your organization records patients' marital or relationship status, do your organization's health records offer an explicit option for patients to indicate that they are in a non-state-registered same-sex partnership?

30% Yes

45% No, but we are interested in this

25% No

Do your organization's health records offer explicit options for patients to indicate that their current gender identity differs from the sex shown on their birth certificate and/or any identification, insurance, or other documents used in admitting/registration?

13% Yes, this information may be recorded via explicit options

42% No, but we are interested in this

45% No, this information may only be recorded in free-form notes

Do your organization's health records offer explicit options for indicating patients' sexual orientation, if they volunteer this information for inclusion in their records?

15% Yes, this information may be recorded via explicit options

39% No, but we are interested in this

46% No, this information may only be recorded in free-form notes

If your organization records information about patients' parents, do your health records offer explicit options for information about patients' parents beyond "mother" and "father" (e.g., "parent/guardian 1, parent/guardian 2, parent/guardian 3") to be inclusive of same-sex parents and other diverse families?

35% Yes

51% No, but we are interested in this

14% No

✓ Does your organization provide employees with training explicitly reminding them that LGBT status is confidential patient information?

45% Yes

42% No, but we are interested in this



To be more inclusive of same-sex parents and other diverse families, Cincinnati Children's Hospital Medical Center made changes to its electronic registration process in EPIC in 2014. These changes included updating options in the parental/guardian section of the registration system. Instead of entering "Mother/Father/Parent," Cincinnati Children's now has the ability to add the same relationship multiple times (ie. 2 mothers, 2 fathers). This allows multiple adults to be identified as responsible caretakers for admitted children.

To be more welcoming and supportive of their transgender patients, a second, more technically complex change involves a system flag to remind the staff member or provider to use the patient's "preferred" name and pronouns. The system currently allows all users to input the preferred name. In the future, they are planning to include a drop-down box in the gender section to force the registration personnel to input "natal gender" and "current gender". This second system change, as well as education on navigating the change for their registration personnel, is being developed for launch in 2015.

"When we added the **Transgender Clinic to the** scope of LGBT care provided by Cincinnati Children's **Teen Health Center last** year, we recognized that safe, trusting and successful care for our gender variant and transgender patients could not happen in a vacuum. The support fostered throughout the organization has been vital. A key example has been our partnering with Registration Services to broaden the registration forms to include an option to input the patient's preferred name. By offering fields for things such as preferred name and pronouns, it does not only ensure safety through accurate information, it also creates a holistic trusting. more welcoming experience for the patients and their families. We see a variety of children in our clinic and we are proud that the people and processes in our organization support the care for the diversity of our patients and their families."

Lee Ann Conard, DO

Lead Physician, Transgender Clinic Cincinnati Children's Hospital Medical Center

Medical Decision-Making

HEALTHCARE ORGANIZATIONS HAVE SOMETIMES FAILED TO HONOR LGBT PATIENTS'

right to designate the person of their choice, including a same-sex partner, to make medical decisions on their behalf should they become incapacitated, even when legally valid medical decision-making documents have been presented. To prevent these failures, it is critical that healthcare organizations be aware that, in 2011, CMS issued guidance to support enforcement of the right of patients to designate the person of their choice, including a same-sex partner, to make medical decisions on their behalf should they become incapacitated. In addition, employee training related to medical decision-making should affirm that LGBT people have the same medical decision-making rights as other patients.

HEI participants' responses to Checklist questions about best practices in medical decision-making are reported in aggregate below. Although 89% indicated that they explicitly inform patients of their right to designate a same-sex partner as medical decision-maker, only 25% include LGBT-specific information in employee training about patient decision-making. But 59% of respondents indicated interest in adding this information to training.

Does your organization explicitly inform patients of their right to designate a person of their choosing, including a same-sex partner, as medical decision-maker?

89% Yes

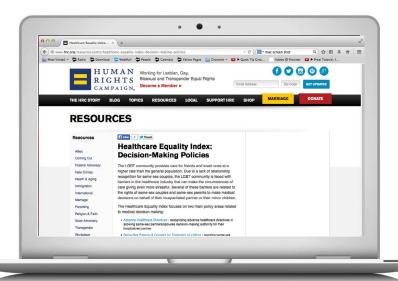
8% No, but we are interested in this

3% No

If your organization provides employees with training related to medical decision-making, does the training include LGBT-specific information?

25% Yes

59% No, but we are interested in this



All LGBT people are strongly encouraged to create advance healthcare directives (e.g., durable powers of attorney, healthcare proxies and living wills). These vital documents allow people to express their healthcare wishes and to designate representatives to make medical decisions on their behalf in the event of incapacitation.

For more information, visit:

www.hrc.org/decision-making-policies

"The use of LGBTQ patients in a variety of case scenarios allows us to reinforce our organizational commitment to being respectful, expert, caring partners in health for the neighbors we serve, who represent our diverse communities. This reinforces The Christiana Care Way: creating innovative, effective, affordable systems of care that our neighbors value."

Timothy D. Rodden

Director of Pastoral Services Christiana Care Health System

Christiana Care Health System is committed to providing staff with the knowledge and skills to effectively advance LGBTQ cultural competency. A strength of their approach is utilizing case scenario-based learning to illustrate specific concepts that resonate with caregivers. In the case of medical decision-making for example, they have a scenario that illustrates how under Delaware law a person can verbally name a power of attorney (POA) for healthcare in the absence of a written POA. The scenario involves a same sex couple which not only teaches providers about the legal principle involved but also allows them to think about the fact that "families" come in all varieties.

Employment Benefits and Policies

THE LGBT EMPLOYEES OF A HEALTHCARE ORGANIZATION PLAY A VITAL ROLE in ensuring LGBT patient-centered care by informally educating co-workers about patient concerns, offering feedback about organizational policies and practices and conveying to the local community the organization's commitment to equity and inclusion. It is critical that LGBT employees, like LGBT patients, receive equal treatment, particularly vis-à-vis health-related benefits and policies. HEI participants' responses to the employment-related Checklist questions are reported in aggregate below and reveal some significant gaps in benefits and policies.

If your organization offers healthcare benefits to spouses of benefits-eligible employees, do you also offer healthcare benefits to same-sex partners of benefits-eligible employees?

82% Yes

8% No, but we are interested in this

10% No

Does your organization have at least one health insurance plan available to all employees that explicitly covers medically necessary healthcare services for transgender people, including gender transition-related treatment?

20% Yes

39% No, but we are interested in this

41% No

Has your organization trained and clearly designated at least one employee at an appropriate level of skill, knowledge and influence to serve as an adviser/advocate for transgender employees, particularly those transitioning on the job?

32% Yes

47% No, but interested

21% No

If your organization offers any of the "soft benefits" below to employees' spouses, are they also offered to employees' same-sex partners?

Benefit	Yes, offered to partners	No, not offered to partners
Employer-provided life insurance for spouse	74%	26%
FMLA leave or equivalent	70%	30%
Discounts for spouse	84%	16%
(e.g., transportation, gym membership)		
Bereavement leave in case of spouse's death	86%	14%

If your organization has conducted an anonymous survey of employees with respect to climate, diversity, or a similar topic, did LGBT employees have an opportunity to identify themselves as such within the survey?

29% Yes

50% No, but we are interested in this

21% No

✓ If your organization has conducted an anonymous survey of employees with respect to climate, diversity, or a similar topic, did the survey include one or more questions related to LGBT concerns?

21% Yes

57% No, but we are interested in this

22% No

Does your organization have an officially recognized LGBT employee group (i.e., a group that receives funding, meets regularly with organization leadership, is listed on the organization website with contact information and/or advises on LGBT-related policies and practices)?

42% Yes

35% No, but we are interested in this

23% No

✓ Since January 1, 2013, has your organization commemorated a "LGBT holiday" (e.g., National Coming Out Day, Transgender Day of Remembrance, National LGBT Health Awareness Week, Pride)?

47% Yes

28% No, but we are interested in this

25% No

✓ Are your organization's hiring/recruitment efforts explicitly LGBT-inclusive?

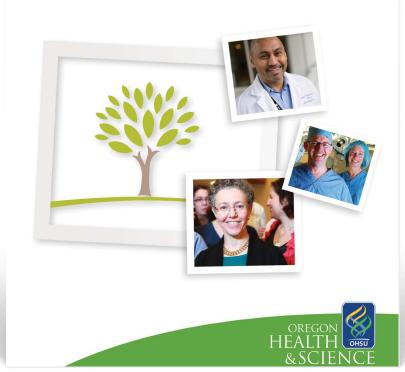
53% Yes

33% No, but we are interested in this

14% N

By far the most common form of explicit LGBT inclusion in hiring/recruitment was a statement that the organization does not discriminate on the basis of LGBT status (85% of respondents). Other forms of inclusion were much less common: 22% sent job postings to LGBT groups or publications, 15% had attended an LGBT job fair and 3% have a brochure designed for LGBT applicants.

Benefit highlights guide 2014 plan year



"One of OHSU's core missions is to be a diverse organization that nurtures a community of inclusion. One important step toward enhancing the climate of inclusion is ensuring access to medically necessary care for transgender employees and their dependents."

Joseph Robertson, M.D., M.B.A. President Oregon Health and Science University

Oregon Health and Science University is committed to improving health and well-being for all Oregonians. In 2012, OHSU reinforced that commitment when it became the largest employer in Oregon to extend health insurance coverage for care related to gender transition.

The American Medical Association designates transition-related healthcare as medically necessary. Several other physicians' organizations, including the American Psychiatric Association, the American College of Obstetricians and Gynecologists and the National Association of Social Workers and OHSU experts agree that improved care for the transgender community is needed. OHSU decided to extend services based on expert opinions and its own internal review.

Community Engagement

HEALTHCARE ORGANIZATIONS CAN BEST EXTEND A WELCOME TO LGBT PEOPLE in their service area by reaching out to them via regular community engagement initiatives like those recommended in the Additional Best Practices Checklist. In addition, HEI Equality Leaders can publicize the fact that they meet the Core Four criteria for foundational LGBT equity and inclusion.

HEI participants' responses to the Checklist questions about community engagement are reported in aggregate below.

- ✓ Has your organization conducted a formal needs assessment or gap analysis vis-à-vis LGBT services and programs with local LGBT individuals or groups?
 - **20%** Yes
 - **62%** No, but we are interested in this
 - **18%** No
- ✓ Since July 1, 2013, has your organization participated in or supported one or more LGBT-related events or initiatives in its service area?
 - **51%** Yes
 - **35%** No, but we are interested in this
 - **14%** No
- ✓ Does your organization have a representative of an LGBT organization or an openly LGBT person serving on a governing or community advisory board?
 - **54%** Yes
 - **32%** No, but we are interested in this
 - **14%** No
- ✓ Since July 1, 2013, has your organization held a meeting with one or more representatives of an LGBT organization to discuss LGBT-related concerns?
 - **57%** Yes
 - **28%** No, but we are interested in this
 - **15%** No
- Does your organization conduct or substantially support LGBT health-related research?
 - **25%** Yes
 - **52%** No, but we are interested in this
 - **23%** No

The vast majority of participants displayed their support for the LGBT community through participating in and sponsoring local pride events as illustrated in the adjoining photos. Facilities also put on LGBT health fairs, held educational talks for healthcare providers, participated in Transgender Day of Remembrance and actively engaged with LGBT patients, employees and local communities in a diverse variety of events and programs, such as these:

Advocate Illinois Masonic Medical

Center hosted a symposium entitled "Current Legal & Health Topics for the LGBT Community: What Does Marriage Equality Mean for my Health Care?" to ensure LGBT patients "learn what you need to know about your health care rights and responsibilities in light of Illinois marriage equality!"

Denver Health Medical Center held an LGBT Health Fair

Froedtert Health and University of Wisconsin Hospital & Clinics

sponsored the 1st Annual LGBTPM Symposium: An Introduction to Transgender Healthcare

UC Davis Medical Center hosted an event called "Come Out for Your Health" to celebrate "our diversity and our commitment to individualized, respectful care!"

VA Captain James A. Lovell Federal Health Care Center, VA Edward Hines Jr. Hospital and VA Jesse Brown Medical Center all sponsored a second annual "Operation: Do Ask, Do Tell" symposium for LGBT Veterans, Active Duty Service Members, families, friends and healthcare providers focusing on health needs and resources.





